

IN THE MIDDLE DISTRICT COURT
STATE OF PENNSYLVANIA

Richard Katz

(Name of Plaintiff/Petitioner)

vs.

National Board of Medical Examiners

(NBME) / United States Medical Licensing

Exam Organization (USMLE Org.)

(Name of Defendant/Respondent)

Case No: _____

Judge: _____

PETITONER'S PRO SE PETITION TO PROCEED IN FORMA PAUPERIS

COMES NOW Petitioner, *pro se*, and moves this Honorable Court to grant this Petition to Proceed *In Forma Pauperis*. In support thereof, Petitioner submits the attached Affidavit of Indigency. As shown by the affidavit, Petitioner does not have the funds to pay the filing fee to initiate a civil petition in superior court and requests that the filing fees be waived.

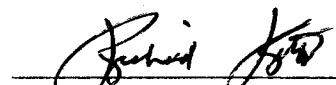
WHEREFORE, Petitioner moves the Court to grant this petition.

Respectfully submitted this the 15 day of June, 2015.

FILED
SCRANTON

JUN 17 2015

SJ
DEPUTY CLERK


Petitioner, Pro Se

IN THE MIDDLE DISTRICT COURT
STATE OF PENNSYLVANIA

Richard Katz

(Name of Plaintiff/Petitioner)

vs.

Case No: _____

National Board of Medical Examiners

(NBME) / United States Medical Licensing

Exam Organization (USMLE Org.)

(Name of Defendant/Respondent)

Judge: _____

AFFIDAVIT OF INDIGENCE

COMES NOW Petitioner under oath and pursuant to O.C.G.A. § 9-15-2 (a)(1) and Rule 36.10 of the Uniform Rules of the Superior Courts. In support of this affidavit, Petitioner shows the following:

1.

I am 45 years old. My highest grade in school completed was 12 grade and I have completed 8 years of college.

2.

I am currently unemployed. I have been unemployed approximately 11 months.

3.

My family qualifies for and receives food stamps or other benefits of \$253.00 per month.

5.

My monthly payments and expenses are as follows:

\$1200 per month

(include mortgage/rent, utilities, food, phone, credit card, etc.)

6.

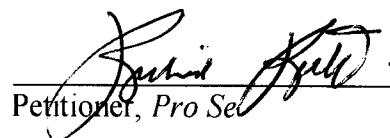
I have 0 in savings. I own the following assets or property
none

7.

My current debt totals approximately \$400,000.

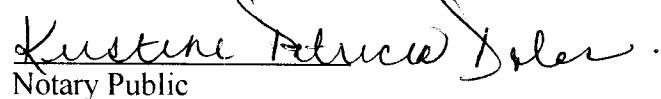
WHEREFORE I am unable to pay for the cost of filing and serving this action and other court costs associated with this action, and I request that this Honorable Court allow me to proceed *in forma pauperis*.

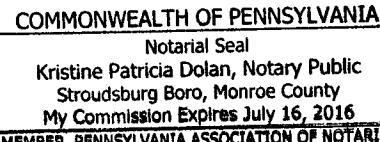
This the 15 day of June, 2015.


Petitioner, Pro Se

SWORN AND SUBSCRIBED

before me this 15 day of June, 2015.


Kristine Patricia Dolan
Notary Public



Law Office of Charles Weiner

Attorney at Law
Cambria Corporate Center 501 Cambria Avenue
Bensalem, PA 19020
Phone: 267-685-6311 | Fax: 215-604-1507

Account Statement

Prepared for Richard Katz
Re: Richard Katz / NBME

Previous Balance	\$ (875.00)
Current Charges	\$ 1,375.00
New Balance	\$ 500.00
Adjustments	\$ (375.00)
Payments	\$ (500.00)
Now Due	\$ 500.00
Trust Account	\$ 0.00

Paid in Full

* * Plaintiff has exhausted
all financial Resources *

Law Office of Charles Weiner

Attorney at Law
Cambria Corporate Center 501 Cambria Avenue
Bensalem, PA 19020
Phone: 267-685-6311 | Fax: 215-604-1507

INVOICE

Richard Katz
Stroudsburg, PA

Invoice Date: April 21, 2015
Invoice Number: 10195
Invoice Amount: \$1,375.00

Matter: Richard Katz / NBME

Attorney's Fees

12/5/2014	Telephone conference with Richard Katz re: NBME denial.	C.W.	.50	No Charge
1/14/2015	Review and analyze merit of accommodation request and extension of 6 year rule.	C.W.	1.60	\$400.00
1/14/2015	Telephone conference with Richard Katz re: request for accommodations and documentation and advice.	C.W.	1.20	\$300.00
1/28/2015	Telephone conference with Richard Katz re: recommendations for pursuing licensing.	C.W.	.30	\$75.00
1/28/2015	Telephone conference with Atty. Indest re: Florida State Medical Board's process for obtain waiver of NBME ruling.	C.W.	.40	\$100.00
4/7/2015	Telephone conference with Richard Katz re: letter to State Bd. of Medicine.	C.W.	.20	No Charge
4/17/2015	Telephone conference with Richard Katz re: meeting with State Bd of Medicine.	C.W.	.20	No Charge
4/17/2015	Review document provided by client to State Bd. of Medicine in preparation to draft letter.	C.W.	.60	\$150.00
4/17/2015	Research and draft, revise, finalize and transmit letter to State Bd. of Medical Examiners.	C.W.	1.40	\$350.00
SUBTOTAL:			6.40	\$1,375.00

Costs

SUBTOTAL:	\$0.00
-----------	--------

Matter Ledgers

1/5/2015	Balance before last invoice	\$0.00
1/5/2015	Payment of engagement fee.	\$(500.00)
1/30/2015	(Adjustment) Attorney time write off.	\$(375.00)
4/21/2015	Invoice 10195	\$1,375.00
SUBTOTAL:		\$500.00

Trust Account

4/21/2015	Previous Balance	\$0.00
Available in Trust:		\$0.00

TOTAL \$1,375.00
PREVIOUS BALANCE (CREDIT) \$875.00

CURRENT BALANCE DUE AND OWING \$500.00